

FAMILY HOUSING VOUCHER AGREEMENT
Assignment to Quarters

Last Name

First Name

Address

- I do hereby agree and understand that I must report to IPAC within three (3) days to inform them of my change of address and the review of other entitlements I may or may not rate due to my assignment of quarters. Furthermore, I will monitor my LES statement for the next month to ensure that the entitled housing allowance has been stopped on the proper date.

(INT)

- I acknowledge the fact that my basic Allowance for housing (BAH) Will be stopped after my effective date of assignment to government quarters. I Understand that if my LES statement reflects that I am drawing the allowance after Government quarters are assigned (the effective date of the assignment to Government quarters), I will need to take a copy of my assignment voucher and LES statement to IPAC/UNIT ADMIN and have my BAH stopped immediately

(INT)

- I understand that if I fail to adhere to the previously mentioned statements concerning my BAH entitlement, I will become indebted to the U.S. Government for the delinquent BAH amount. **(If you have any questions concerning this matter please express them to the inspector during the course of your inspection.)**

(INT)

OCCUPANT

Date

FAMILY HOUSING REPRESENTATIVE

Date